



STATE OF MICHIGAN  
DEPARTMENT OF EDUCATION  
LANSING

RICK SNYDER  
GOVERNOR

MICHAEL P. FLANAGAN  
SUPERINTENDENT OF  
PUBLIC INSTRUCTION

August 2, 2012

**MEMORANDUM**

TO: Superintendents and Principals of Title I Elementary and Middle Schools, Alternative Schools and High Schools Identified as Priority and Focus Schools

FROM: Linda Forward, Director *Linda Forward*  
Office of Education Improvement & Innovation

SUBJECT: Required Correspondence to Parents of Students Attending Title I Schools Identified as Priority and/or Focus Schools

The *Elementary and Secondary Education Act* (ESEA), as amended by the *No Child Left Behind Act of 2001* (NCLB), and the Michigan Department of Education's (MDE) recently approved ESEA Flexibility Waiver, requires **Title I schools** that are identified as Priority and/or Focus schools, to disseminate the following specific information to the school community:

- ♦ **Choice/Transfer Letter of Notification** – A letter and supporting materials sent to all parents no later than 14 days before the first day of school explaining their right to transfer their child. The MDE has determined this must occur no later than August 21, 2012. Parents must be provided at least 14 days to respond.

The status of elementary and middle schools, alternative schools and high schools that are identified as Priority or Focus schools in your district, is based on the academic achievement, improvement and achievement gap status of the schools as determined by the MDE. Schools that are identified as Priority or Focus schools must engage in the requirements associated with this identification, including the creation of the parental notification document described above. If a district does not have a transfer option within the district it must document the efforts to enter into a cooperative agreement with other area districts to accept students for transfer to another school that has made Adequate Yearly Progress in the 2011-2012 school year, and is not identified as either a Priority or Focus school. If good faith efforts to develop cooperative agreements result in no options, the district

STATE BOARD OF EDUCATION

JOHN C. AUSTIN – PRESIDENT • CASANDRA E. ULBRICH – VICE PRESIDENT  
NANCY DANHOF – SECRETARY • MARIANNE YARED MCGUIRE – TREASURER  
RICHARD ZEILE – NASBE DELEGATE • KATHLEEN N. STRAUS  
DANIEL VARNER • EILEEN LAPPIN WEISER

608 WEST ALLEGAN STREET • P.O. BOX 30008 • LANSING, MICHIGAN 48909  
[www.michigan.gov/mde](http://www.michigan.gov/mde) • (517) 373-3324

Page 2  
August 2, 2012

must submit evidence of the efforts to the MDE upon request but Michigan will no longer require a "No Options" letter to be sent to parents.

In past years the MDE has provided early technical assistance to districts to ensure that districts are equipped to send approvable letters prior to the start of the school year. Because of the timing of the approval of the ESEA Flexibility Waiver, the MDE is not able to provide early review of draft letters from districts or to implement review and feedback to the districts about the letters.

A checklist and sample/template letters are attached to this correspondence. All template letters will need to be revised by the district to reflect current and accurate information for the building and the district before the letters are sent to parents.

Parental notification documents (or evidence of good faith efforts to obtain a cooperative interdistrict agreement) must be submitted to the MDE upon request as evidence of compliance with these requirements for **Title I schools** that are identified as Priority or Focus. A future communication will be sent notifying districts to complete Certification of Compliance on MEGS+.

To reiterate, the above requirements apply only to **Title I schools** that are identified as Priority or Focus schools.

Thank you for your prompt attention to these requirements. If you have questions about this communication or need more information about sending your required documentation to parents, please feel free to contact Greg Olszta at 517-241-4715 or [mde-ses@michigan.gov](mailto:mde-ses@michigan.gov).

cc: Michigan Education Alliance

### **Choice Letter Requirements**

- ☐ Letter includes specific details regarding the parents' right to transfer their student to another public school, including:
  - ☐ Notice that transportation will be provided subject to certain cost limitations
  - ☐ A list of available school(s) that have made Adequate Yearly Progress in the 2011-2012 school year and that are not identified as Priority or Focus schools (attach copy of list)
  - ☐ Other information to help parents decide which school(s) would be best for their student(s)

## **SAMPLE CHOICE LETTER**

<Date>

<Parent>

<Address>

<City, State, Zip>

Dear <Parent>:

Your child is a student at <ABC School>. You know that your child is important to us and that we want to provide every opportunity for success. Each school in Michigan is required to test students every year using the <Michigan Educational Assessment Program (MEAP) tests/Michigan Merit Exam (MME)>. The results of these tests, as well as participation on the tests are used to determine whether our school is making adequate yearly progress (AYP) and where it ranks in a "Top to Bottom" list of schools and their performance. The Top to Bottom list is used to identify schools that require improvement of various kinds; some have overall low performance and others have large gaps between their high and low achieving students.

Since <ABC School> is identified as a school requiring improvement the district must offer you the opportunity to transfer your child to <specify other school(s) in this district or another neighboring school> that made AYP in the 2011-2012 school year and is not identified for improvement. If the district receives more applications than can be accommodated, priority will be given to the lowest-achieving children from low-income families. You will be notified by mail of your child's transfer status.

To help you decide, we have provided information so you can compare them. Based on this information, you may choose a school using the enclosed transfer form. Transportation to this school will be provided. You must complete this form by <date - *at least 14 days*> and return it to <name and number> for consideration.

To discuss this decision further, please call <name and number> and <he/she/they> will be happy to help you.

Sincerely,

School Official

Enclosures

## **SAMPLE CHOICE LETTER ATTACHMENT**

### **<ABC School> Transfer Information**

Your student may be able to transfer to the following schools that made adequate yearly progress in the 2011-2012 school year and are not identified for improvement. Please complete the attached Transfer Request Form or contact <name> at <number> for more information.

<School Name>

<Other information that will help parents decide what choice would be best for their child(ren) (e.g., grades served, support services, extracurricular activities, application requirements.)>

<School Name>

<Other information that will help parents decide what choice would be best for their child(ren) (e.g., grades served, support services, extracurricular activities, application requirements.)>

<School Name>

<Other Information that will help parents decide what choice would be best for their child(ren) (e.g., grades served, support services, extracurricular activities, application requirements.)>

**<District/PSA Name>**  
**No Child Left Behind (NCLB) Public School Choice/Transfer Request**

***Please print all requested information accurately and clearly***

Please complete one application per child. Check ONLY Option 1 or Option 2 below.

Return this request form on or before <date> to:

<school name>

<school office/contact person>

<street address>

<city/state/zip>

<phone number>

<fax>

***Please complete the following student information:***

Student Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

Student's Grade: \_\_\_\_\_ Student's Date of Birth: \_\_\_\_\_

Name of School Student Currently Attends: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Alternate or Cell: (\_\_\_\_\_) \_\_\_\_\_

Is this student currently enrolled in special education? ☐ Yes ☐ No

**Parent/Guardian Statement:**

I have received and understand the notification sent informing me that <school name> has been identified as a school requiring improvement. I also understand that I have the option to transfer my child to another school that has not been identified as a school requiring improvement. Based on this information, I choose:

☐ **OPTION 1:** Transfer to another school

First choice of school I wish to transfer my child to: \_\_\_\_\_

Second choice of school I wish to transfer my child to: \_\_\_\_\_

☐ **OPTION 2:** Remain at <school name>

\_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date